State of Alaska Department of Commerce, Community, and Economic Development Division of Occupational Licensing Alaska Board of Public Accountancy P.O. Box 110806

Juneau, Alaska 99811-0806 (907) 465-3811

E-mail: license@commerce.state.ak.us Website: www.commerce.state.ak.us/occ.htm

CPA CORPORATION REGISTRATION AND PERMIT TO PRACTICE

Nonrefundable Applic Initial License Fee TOTAL	cation Fee	\$ 50.00 \$ 135.00 \$ 185.00	Make Checks Payable to the "State of Alaska"		
, ,	stration for a perr	mit to practice	e as a corporation of certified	public accountants.	
Firm Name:					
Address:					
Street			City		State ZIP Code

If the answer is "yes" to any of the questions below, please estimate the number of engagements annually.

Does your firm perform:	YES	NO	of Engagements Annually
Governmental Audits			
2. Other Audits			
3. Reviews			
4. Compilations			

We certify that:

Daytime Telephone Number:

- The sole purpose and business of the corporation is to furnish to the public services not inconsistent with AS 08.04 and the regulations adopted under it by the Board of Public Accountancy.
- Each shareholder of the corporation is a certified public accountant of some state in good standing and is principally employed by the corporation or actively engaged in its business; no other person has any interest in the stock of the corporation; the principal officer of the corporation, and any officer or director having authority over the practice of public accountancy by the corporation, is a certified public accountant of some state in good standing.
- At least one shareholder of the corporation is a certified public accountant of Alaska in good standing.
- Except as otherwise provided in AS 08.04, each resident manager in charge of an office of the corporation in Alaska and each shareholder or director personally engaged in Alaska in the practice of public accounting is a certified public accountant in Alaska in good standing.

We agree:

- To facilitate compliance with the provisions of AS 08.04.240 relating to the ownership of stock, there must be a written agreement binding the corporation or the qualified shareholders to purchase shares offered for sale by, or not under the ownership or effective control of, a qualified shareholder and binding a holder, not a qualified shareholder, to sell these shares to the corporation or the qualified shareholders; the agreement must be noticed on each certificate of corporate stock, the corporation may purchase any amount of its stock for this purpose, notwithstanding any impairment of capital, so long as one share remains outstanding.
- The corporation must be in compliance with those other regulations pertaining to corporations practicing public accounting in this state that the board may prescribe. (Alaska Statute 08.04.240)
- Notification must be given to the board within one month after admission or withdrawal of a shareholder from a corporation registered under this section.

5	5. A biennial renewal fee is due at the end of each odd-numbered year. Please keep this office informed of any address change so that we may notify you of the necessity to renew.						
N	ames and Certificate Numbers of Sha	reholders	s Holding Alaska	Certificates			
	Name		Title		Certificate Nu	mber	
N	ames and Certificate Numbers of All	Other Sha	areholders (use a	dditional paper	if necessary)		
Name			Title State		Certificate Number		
PR	OFESSIONAL FITNESS (AS 08.04.480)) – The fo	ollowing guestions	must be answere	ed:		
				No			
	offense, other than minor traffic violations (convictions include Suspended Imposition of Sentence), under the laws of any state or of the United States?						
2.	Have you, any partner, member, or sha or permit to practice public accountance by any licensing board?	reholder e v suspend	ever had your cert led, revoked or otl	ificate, license nerwise acted upo	on		
3.	B. Have you, any partner, member, or shareholder ever had your certificate, license or permit to practice public accountancy denied renewal in any state for any cause other than failure to pay a required fee in that state?						
dod	rou answered "yes" to any of these q cumentation, if applicable. All informa ormation considered confidential by state	tion supp	lied with applicat	detailed stateme ions is considere	ent of explanation ed public informati	and legal on except	
app	behalf of the Corporation, I CERTIFY Dication are true and correct. I unde ure to obtain registration and licensu	rstand th	at any false or m	nowledge, the s nisleading inforr	tatements contair nation herein ma	ned in this y result in	
			Signature of Re	sident Manager o	or Alaska CPA Sha	reholder	
				Date of A	onlication		
SU	BSCRIBED AND SWORN to before me	this	day of	•	•		
•			uay o				
SEAL			Notary Public				
			My Commission	Expires:			
	A COPY OF TH A COPY OF THE ARTICLES OF	E CERTIF	FICATE OF INCO	RPORATION AN	ID HIS APPLICATIOI	N	

The Articles of Incorporation must state the sole purpose and business of the corporation is the practice of public accounting as required by AS 08.04.240(b). (A corporation that is incorporated under AS 10.45 as a professional corporation in Alaska is exempt from this requirement.)

08-612 (Rev. 02/14/05)

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VERIFICATION OF CPA NONRESIDENT CORPORATION

Part I

Instructions to Applicant: Type or print the information needed to complete Part I of this form. If you are a nonresident corporation, please have the state in which you established original licensure as a corporation complete this form. Upon completion of Part II, the state agency must return the form directly to the Division of Occupational Licensing.

completion of Fart II, the state agency must return the form	rullectly to the Division of Occupational Licensing.			
Name of Corporation:				
Mailing Address:				
Daytime Telephone Number:				
Signature:	Date Signed:			
	OO NOT DETACH			
Part II				
the information requested below, and return the form dire	ractice with the Alaska Board of Public Accountancy. Please verify to the Division of Occupational Licensing at the address ned to the applicant. In lieu of this form, the State of Alaska will eximately the same information.			
Licensee's Name as Shown on your Records:				
License #:				
Original Issue Date: C	Current Expiration Date:			
Status:	☐ Lapsed ☐ Other			
Have shareholders met your state's Continuing Education	requirements?			
List derogatory information, if any:				
(BOARD SEAL)	Signature			
	Printed Name			
Return to: Division of Occupational Licensing P.O. Box 110806, Juneau, AK 99811-0806				
	Title			
	Jurisdiction			
	Date			
The above-named Corporation is applying for a permit to prothe information requested below, and return the form dire at the top of the page. The verification is not to be return accept a standard computer verification that provides appropriately a standard computer verification is not to be return accept a standard computer verification that provides appropriately a standard computer verification that provides appropriately a standard computer verification is not to be return accept a standard computer verification is not to be return accept a standard computer verification is not to be return accept a standard computer verification is not to be return accept a standard computer verification is not to be return accept as the top of the top o	Signature Printed Name Title Jurisdiction Jurisdiction Jurisdiction Jurisdiction Jurisdiction Jurisdiction In lieu of this form, the State of Alaska of Alaska oximately the same information. Current Expiration Date:			